PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004									Application or Docket Number			
		CLAIMS A	(Column 1) (Column 2)	SMALL ENT TYPE		TITY OR		OTHER THAN SMALL ENTITY	
U.S. NATIONAL STAGE FEES								RATE	FEE		RATE	FEE
BASIC FEE							1	BASIC FEE		OR	BASIC FEE	300
EXAMINATION FEE								EXAM. FEE			EXAM. FEE	200
SEARCH FEE								SEARCH FEE			SEARCH FEE	4.00
FEE FOR EXTRA SPEC. PGS.			minus 100 =		/ 50 =			X \$ 125 =			X \$ 250 =	- 3'
TOTAL CHARGEABLE CLAIMS			33 mir	nus 20 =	* 13			X \$ 25 =		OR	X \$ 50 =	650.
INDEPENDENT CLAIMS			5 m	inus 3 =	*	2		X \$ 100 =		OR	X \$ 200 =	400
MULTIPLE DEPENDENT CLAIM PRE			ESENT				1	+ \$ 180 =		OR	+ \$ 360 =	
* If	the difference	in column 1 is	less than zero	, enter "(O" in co	lumn 2		TOTAL		OR	TOTAL	1950
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Col						(Column 3)	-	SMALL E	ZOSO ZZIO OTHER THAN NTITY OR SMALL ENTITY			
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	•••••	=		X \$ 25 =		OR	X \$ 50 =	(.
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
,						,		TOTAL ADDIT. FFF		OR	TOTAL ADDIT. FFF	
		(Column 1)		(Colur	mn 2)	(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA				CLAIM			+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT.		OR	TOTAL ADDIT. FFF	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. FORM PTO-875 (Rev. 02/2005)												